

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	A/H	92195	6/1/99
O.I.P.E. CLASSIFIER	MTR	59	6/1/99
FORMALITY REVIEW	AB	65373	6-10-99 8-6-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	7/15/99
1 ✓ / ✓ /	7/15/99
2 ✓ / ✓ /	7/15/99
3 ✓ ✓ / ✓ /	7/15/99
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Claim	Date
Final Original	7/15/99
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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